



Advocates for the American Osteopathic Association  
the people behind the profession

## 2019 AAOA CANDIDATE APPLICATION

Email completed application to [aaoa@osteopathic.org](mailto:aaoa@osteopathic.org) on or before **August 31, 2019**

This application is to be completed by the candidate personally and submitted prior to the above deadline by email. Receipt for this application will be sent by email from the AAOA Affiliate Director [aaoa@osteopathic.org](mailto:aaoa@osteopathic.org) and from the Chairman of the 2019 Nominating Committee, Wendy McDonald, RN [wld51664@aol.com](mailto:wld51664@aol.com).

The positions to be filled for the 2019-2020 AAOA Board of Directors are as follows:

**President-Elect**

**Vice President**

**Recording Secretary/Treasurer**

**Director (2 year position) term ending 2021**

**Director (2 year position) term ending 2021**

A candidate for elective office shall meet the following qualifications:

1. A member in good standing for at least two years;
2. A candidate for the office of President-Elect or Vice President shall have served on the AAOA Board of Directors for at least two years.
3. Further information on specific duties may be found in the AAOA Bylaws.

Any interested persons should submit a completed application to the Nominating Committee before August 3, 2018. Submission of an application does not guarantee a position on the board. Applications will be reviewed by the nominating committee who will then present a slate of nominees at the Annual Business Meeting of the Advocates for the American Osteopathic Association. The slate will also be posted in advance on the AAOA website. Nominations will be accepted from the floor during the annual business meeting of the AAOA.



Those wishing to encourage participation of other individuals should pursue this prior to the August 31, 2019 deadline period.



**NAME OF CANDIDATE:** [Click here to enter text](#)

**HOME ADDRESS:** [Click here to enter text](#)

**TELEPHONE CONTACT - Home #:** [Click here to enter text.](#) **Cell#** [Click here to enter text](#)

**EMAIL ADDRESS:** [Click here to enter text](#)

**Please consider my application as a candidate for the following position(s) on the AAOA Board of Directors:**

President Elect    Vice President    Recording Secretary/Treasurer    Director (two-year term)

am currently serving on the AAOA Board of Directors.

am a member in good standing for the current membership year beginning June 1, 2016, as:

Regular    Retired    Widowed    RAA    SAA    Life

have been a member in good standing for at least **two years** prior to the current membership year as:

Regular    Retired    Widowed    RAA    SAA    Life

I have completed two years on the AAOA board previously and am applying for a current position. (Please list the membership years of your prior terms on the board, noting in what capacity you served, (e.g., Director or Officer position.)

[Click here to enter text](#)

**OSTEOPATHIC PERSONAL CONNECTIONS** Membership in the Advocates for the American Osteopathic Association is open to all. What is your connection(s) to the Osteopathic Family? Provide what you feel is helpful for understanding your level of interest, support and commitment to the osteopathic profession below:

currently live in a state with no state affiliated organization of AAOA.

am now or was previously a member in good standing of an Intern/Resident affiliated organization of AAOA.

Area/Name of Organization: [Click here to enter text.](#)

Contact information: [Click here to enter text.](#)

am now or was previously a member in good standing of an SAA affiliation organization of AAOA.

Area/Name of Organization: [Click here to enter text.](#)

Contact information: [Click here to enter text.](#)

have more than one active membership with an AAOA affiliate. Please list other affiliate organizations:

Area/Name of Organization: [Click here to enter text](#)

Contact information: [Click here to enter text.](#)

**Osteopathic Connections:**

I am the spouse of an osteopathic physician, or

I am the significant other of an osteopathic physician.

Name of D.O.: [Click here to enter text.](#)

I am an osteopathic physician. School of graduation: [Click here to enter text.](#)

Other affiliation: [Click here to enter text](#)

### **LEADERSHIP EXPERIENCE (Osteopathic Advocate/Auxiliary Participation)**

*Please tell the Nominating Committee about your leadership experience by completing the following as applicable to national, state, IRAA or SAA. Indicate the choice and please provide details (CV/Resume may be attached instead).*

**CURRENT OFFICE(S) HELD:**                      **National**                      **State**                      **IRAA**                      **SAA**  
Title: [Click here to enter text.](#)                      Organization: [Click here to enter text](#)  
How many years have you served in this position? [Click here to enter text](#)  
Describe your duties or activities while serving in this capacity: [Click here to enter text](#)

**PREVIOUS OFFICE(S) HELD:**                      **National**                      **x State**                      **IRAA**                      **SAA**  
Title: [Click here to enter text.](#)                      Organization: [Click here to enter text](#)  
How many years did you serve in this position? [Click here to enter text](#)  
Describe any specific duties or activities while serving in this capacity: [Click here to enter text](#)

**COMMITTEE (s) CHAIRED:**                      **National**                      **State**                      **IRAA**                      **SAA**  
Title: [Click here to enter text.](#)                      Committee Name: [Click here to enter text.](#)  
Chapter Name: [Click here to enter text.](#)  
How many people were on your committee? [Click here to enter text.](#)  
How many years did you serve as chairperson of this committee? [Click here to enter text.](#)

**COMMITTEE MEMBER PARTICIPATION:**                      **National**                      **State**                      **IRAA**                      **SAA**  
Committee Name: [Click here to enter text.](#)  
Chairman of Committee: [Click here to enter text.](#)  
How many years did you serve as member of this committee? [Click here to enter text.](#)  
As a member of this committee, what was your responsibility? [Click here to enter text.](#)

### **What do you feel you could contribute as a member of the AAOA Board?**

[Click here to enter text](#)

### **PERSONAL BACKGROUND**

*Please tell the Nominating Committee about yourself (Extra pages, a CV, or a resume may be attached or used to replace this section)*

1. Please share your education or training background. Name of college and degree(s) if obtained:
2. Are you presently employed full or part time, if so what is the job and position you hold?
3. Other pertinent information that you would like the Nominating Committee consider: (awards, special recognition, honors, etc.)?
4. If you are active in volunteer work in any areas, please share what you do and for whom.
5. Skills or experience in business, financial management, promotions, marketing, event planning, education and website development are all areas of need for the AAOA. If you have these or other training or talents, please share.
6. Please share any special skills, talents or interests.

If the Nominating Committee wishes to clarify information in this form, which is your preferred time and means of contact from the information provided in this form?     Home phone     Cell Phone     Email

8-12 mornings 12-5 afternoon 5-9 evening Other [Click here to enter text.](#)

### **AAOA BOARD OF DIRECTOR RESPONSIBILITIES**

By submitting this application as a candidate for the positions marked, I acknowledge that members of the AAOA board are expected to attend Post-Convention, Mid-Year, Pre-convention Board Meetings and conference calls throughout the year. I have read and accept the following regarding my potential board participation.

According to the 2016 revised bylaws, members of the AAOA Executive Committee are expected to chair specific committees. These responsibilities are as follows:

- President Elect shall serve as the chairperson of the Student Advocates Association (SAA) Committee.
- Vice President shall serve as the chairperson of the Membership Committee.
- Secretary/Treasurer shall serve as the chairperson of the “Still Fit for Life” Fun Run Committee.

All other committee chairs are appointed by the President. Other committees include (but are not limited to): Convention, Intern Resident Advocate Association (IRAA), Special Projects, Publicity and Website, Educational Endowment Fund (EEF), Legislative Awareness, and Yellow Ribbon Suicide Prevention. Members of the Advocates for the American Osteopathic Association Board of Directors are expected to chair a committee, are responsible for the success of that committee, and expected to reply to electronic correspondence (email) and present committee reports.

### **CANDIDATE’S WRITTEN CONSENT**

I hereby give consent to have my name placed in nomination for the AAOA position for the 2017 year as indicated herein. The information is provided solely by me and is submitted in this email. I have provided confirmation that I meet the qualifications for the positions desired and if elected, will fulfill the duties of my position and will uphold the mission of the AAOA to the best of my ability.

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(Electronic Signature)

(Date)